Fill	n this information to identify your cas	se:			
Deb	tor 1 Robert A. Rollins				
Dob	First Name	Middle Name	Last Name		
	tor 2 se if, filing) Cindy N. Rollins First Name	Middle Name	Last Name		
Unit	ed States Bankruptcy Court for the: S	OUTHERN DISTRICT	OF MISSISSIPPI		
	_				
Cas (if kno	e number wn)			☐ Check	if this is an
				amend	led filing
Off	icial Form 106Sum				
		d Liabilities an	d Certain Statistical Information	1	2/15
			are filing together, both are equally responsible for		
	mation. Fill out all of your schedules t original forms, you must fill out a nev		e information on this form. If you are filing amend the box at the top of this page.	ed schedul	es after you file
Part		•			
ran	T. Odminarizo Todi Associs				
				Your as Value of	ssets f what you own
1.	Schedule A/B: Property (Official Form	1064/R)			<u>, </u>
٠.	1a. Copy line 55, Total real estate, from	Schedule A/B		\$	40,000.00
	1b. Copy line 62, Total personal proper	ty, from Schedule A/B		\$	41,550.00
	1c. Conviling 63. Total of all property or	Schedule A/R		\$	81,550.00
	rc. Copy line 63, Total of all property of	i Scriedule A/B		Ψ	81,550.00
Part	2: Summarize Your Liabilities				
				Your lia	
				Amount	you owe
2.	Schedule D: Creditors Who Have Claim 2a Copy the total you listed in Column		(Official Form 106D) he bottom of the last page of Part 1 of <i>Schedule D</i>	\$	11,320.00
0	,	,	1 0		
3.	Schedule E/F: Creditors Who Have Uns 3a. Copy the total claims from Part 1 (p		s) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (r	nonpriority unsecured cla	aims) from line 6j of Schedule E/F	\$	35,570.00
	(·	,			00,01010
			Your total liabilities	\$	46,890.00
					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Part	3: Summarize Your Income and Ex	penses			
4.	Schedule I: Your Income (Official Form	1061)			
٠.			<i>I</i>	\$	3,544.80
5.	Schedule J: Your Expenses (Official Fo	rm 106J)			2 500 00
	Copy your monthly expenses from line	22c of Schedule J		\$	3,528.00
Part	4: Answer These Questions for Ad	ministrative and Statis	stical Records		
6.	Are you filing for bankruptcy under C	Chapters 7, 11, or 13?			
	☐ No. You have nothing to report on	this part of the form. Ch	neck this box and submit this form to the court with yo	ur other sch	edules.
	Yes				
7.	What kind of debt do you have?				
			lebts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
		.,	e nothing to report on this part of the form. Check this	s hav and a	hmit this form to
	I our debts are not primarily cor	isumer uebts. Tou nav	e norming to report on this part of the form. Check this	, DOX and Su	טו ווווטו פוווו וט

22-01937-KMS Dkt 3 Filed 09/22/22 Entered 09/22/22 11:16:40 Page 2 of 43

	Robert A. Rollins		
Debtor 2	Cindy N. Rollins	Case number (if known)	
	the court with your other schedules.		

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,370.89

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

22-01937-KMS Dkt 3 Filed 09/22/22 Entered 09/22/22 11:16:40 Page 3 of 43

Debtor	1 Rol	bert A. Ro	ollins				
		Name		Name	Last Name		
Debtor (Spouse,		dy N. Ro		Name	Last Name		
	3,						
United	States Bankrupto	y Court for	the: SOUTHER	N DISTRI	ICT OF MISSISSIPPI		
Case n	umber						☐ Check if this is a amended filing
Offic	ial Form 1	06A/F	ł.				
	edule A		-				12/15
think it f informat	its best. Be as cor ion. If more space every question.	nplete and a	accurate as possibl attach a separate sl	e. If two m neet to this	nly once. If an asset fits in more than or narried people are filing together, both ar s form. On the top of any additional page state You Own or Have an Interest In	e equally responsible for	supplying correct
					nce, building, land, or similar property?		
•	ou own or nave any	riegai or eq	uitable interest in a	iny resider	ice, building, land, or similar property?		
I I Nia							
_	o. Go to Part 2.						
_	o. Go to Part 2.	perty?					
_		perty?					
■ Ye		perty?		What is	s the property? Check all that apply		
■ Ye				_	s the property? Check all that apply Single-family home	Do not deduct secured	claims or exemptions. Put
■ Ye	es. Where is the pro	 I	cription		s the property? Check all that apply Single-family home Duplex or multi-unit building	the amount of any second	claims or exemptions. Put ured claims on Schoole D:
■ Ye	s. Where is the pro	 I	cription		Single-family home	the amount of any second	
■ Ye	s. Where is the pro	 I	cription		Single-family home Duplex or multi-unit building	the amount of any second	ured claims on Schedule D:
1.1 8'	ss. Where is the pro	E, or other des			Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any sectoreditors Who Have Control Value of the	ured claims on Schedule D: laims Secured by Property. Current value of the
1.1 8'	ss. Where is the pro	 I	7 39629-0000 ZIP Code		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any sec Creditors Who Have C	ured claims on Schedule D: laims Secured by Property. Current value of the portion you own?
1.1 8' Std	ss. Where is the pro	E e, or other des MS	39629-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any sectoreditors Who Have Control Value of the entire property? \$40,000.00	Current value of the portion you own? \$\frac{40,000.00}{20}\$
1.1 8' Str	ss. Where is the pro	E e, or other des MS	39629-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	the amount of any sectoreditors Who Have Control Value of the entire property? \$40,000.00 Describe the nature of (such as fee simple, the control of the co	Current value of the portion you own? \$\frac{4000000}{40000000000000000000000000000
1.1 8' Str	ss. Where is the pro	E e, or other des MS	39629-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one	the amount of any sectoreditors Who Have Control Value of the entire property? \$40,000.00 Describe the nature of the entire of	Current value of the portion you own? \$\frac{4000000}{40000000000000000000000000000
1.1 8' Str	ss. Where is the pro	E e, or other des MS	39629-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	the amount of any sectoreditors Who Have Control Value of the entire property? \$40,000.00 Describe the nature of (such as fee simple, the control of the co	Current value of the portion you own? \$\frac{4000000}{40000000000000000000000000000
1.1 8' Sti	1 Katie Trail SE reet address, if available ogue Chitto	E e, or other des MS	39629-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only	the amount of any sect Creditors Who Have Control Courrent value of the entire property? \$40,000.00 Describe the nature of (such as fee simple, if known)	Current value of the portion you own? \$\frac{40,000.00}{40,000.00}\$ of your ownership interest enancy by the entireties, on.
1.1 8' Sti	I Katie Trail SE reet address, if available ogue Chitto	E e, or other des MS	39629-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any sect Creditors Who Have Control Courrent value of the entire property? \$40,000.00 Describe the nature of (such as fee simple, if known)	Current value of the portion you own? \$\frac{4000000}{40000000000000000000000000000
1.1 8' Sti	I Katie Trail SE reet address, if available ogue Chitto	E e, or other des MS	39629-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any sect Creditors Who Have Control Current value of the entire property? \$40,000.00 Describe the nature of (such as fee simple, the alife estate), if known the control contr	Current value of the portion you own? \$\frac{40,000.00}{40,000.00}\$ If your ownership interest enancy by the entireties, on.
1.1 8' Sti	I Katie Trail SE reet address, if available ogue Chitto	E e, or other des MS	39629-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this ite ty identification number:	the amount of any sect Creditors Who Have Control Current value of the entire property? \$40,000.00 Describe the nature of (such as fee simple, if known a life estate), if known the control Check if this is control (see instructions) Check if this is control c	Current value of the portion you own? \$40,000.00 If your ownership interest enancy by the entireties, on.
1.1 8' Sti	I Katie Trail SE reet address, if available ogue Chitto	E e, or other des MS	39629-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this ite ty identification number:	the amount of any sect Creditors Who Have Control Current value of the entire property? \$40,000.00 Describe the nature of (such as fee simple, if known a life estate), if known the control Check if this is control (see instructions) Check if this is control c	Current value of the portion you own? \$40,000.00 If your ownership interest enancy by the entireties, on.

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

22-01937-KMS Dkt 3 Filed 09/22/22 Entered 09/22/22 11:16:40 Page 4 of 43

the amount of any se Creditors Who Have Current value of the entire property? \$2,500.0 Do not deduct secure the amount of any se Creditors Who Have Current value of the entire property? \$2,000.0 d accessories Do not deduct secure the amount of any se	portion you own? 9 \$2,500.0 10 d claims or exemptions. Put cured claims on Schedule D. Claims Secured by Property. 12 Current value of the portion you own?
the amount of any se Creditors Who Have Current value of the entire property? \$2,500.0 Do not deduct secure the amount of any se Creditors Who Have Current value of the entire property? \$2,000.0 d accessories Coessories Do not deduct secure the amount of any se Creditors Who Have Current value of the entire property?	cured claims on Schedule D. Claims Secured by Property. Current value of the portion you own? \$\frac{2}{2}\$ claims or exemptions. Put cured claims on Schedule D. Claims Secured by Property. Current value of the portion you own?
the amount of any se Creditors Who Have Current value of the entire property? \$2,500.0 Do not deduct secure the amount of any se Creditors Who Have Current value of the entire property? \$2,000.0 d accessories Coessories Do not deduct secure the amount of any se Creditors Who Have Current value of the entire property?	cured claims on Schedule D. Claims Secured by Property. Current value of the portion you own? \$\frac{2}{2}\$ claims or exemptions. Put cured claims on Schedule D. Claims Secured by Property. Current value of the portion you own?
Current value of the entire property? \$2,500.0 Do not deduct secure the amount of any se Creditors Who Have Current value of the entire property? \$2,000.0 d accessories Coessories Do not deduct secure the amount of any se Creditors Who Have Current value of the	Current value of the portion you own? 9 \$2,500.0 10 \$2,500.0 10 claims or exemptions. Put cured claims on Schedule D Claims Secured by Property. 12 Current value of the portion you own?
Do not deduct secure the amount of any se Creditors Who Have Current value of the entire property? \$2,000.0 d accessories Ccessories Do not deduct secure the amount of any se Creditors Who Have Current value of the	portion you own? 9 \$2,500.0 10 \$2,500.0 10 d claims or exemptions. Put cured claims on Schedule D. Claims Secured by Property. 12 Current value of the portion you own?
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Do not deduct secure the amount of any se Creditors Who Have Current value of the entire property? \$2,000.0 d accessories Ccessories Do not deduct secure the amount of any se Creditors Who Have Current value of the	ed claims or exemptions. Put cured claims on <i>Schedule D.</i> <i>Claims Secured by Property.</i> • Current value of the portion you own?
the amount of any se Creditors Who Have Current value of the entire property? \$2,000.0 d accessories ccessories Do not deduct secure the amount of any se Creditors Who Have Current value of the	cured claims on Schedule D. Claims Secured by Property. Current value of the portion you own?
Current value of the entire property? \$2,000.0 d accessories Do not deduct secure the amount of any se Creditors Who Have Current value of the	Current value of the portion you own?
\$2,000.0 d accessories ccessories Do not deduct secure the amount of any se Creditors Who Have Current value of the	portion you own?
\$2,000.0 d accessories ccessories Do not deduct secure the amount of any se Creditors Who Have Current value of the	
Do not deduct secure the amount of any se Creditors Who Have	92,000.0
Do not deduct secure the amount of any se Creditors Who Have	0 \$2,000.0
Do not deduct secure the amount of any se Creditors Who Have	
the amount of any se Creditors Who Have Current value of the	d daime ar avamations. Dut
Current value of the	cured claims on Schedule D
	Claims Secured by Property.
entire property?	
	portion you own?
\$1,200.00	\$1,200.0
\$1,200.00	φ1,200.t
	ed claims or exemptions. Put
	Claims Secured by Property.
Current value of the	Current value of the
entire property?	portion you own?
\$2,200.00	\$2,200.0
	the amount of any se Creditors Who Have Current value of the entire property?

	Debtor 1 Debtor 2	Robert A. Rollins Cindy N. Rollins	Case num	ber (if known)	
6.		old goods and furnishings es: Major appliances, furniture, linens,	china, kitchenware		
	□ No				
	Yes.	Describe			
		furniture & hous	sehold goods		\$2,200.00
_					
7.	□ No	es: Televisions and radios; audio, video including cell phones, cameras, me	eo, stereo, and digital equipment; computers, printers, scan edia players, games	ners; music (collections; electronic devices
	■ Yes.	Describe			
		various electron	ics		\$650.00
_					
8.	Example ■ No	bles of value es: Antiques and figurines; paintings, p other collections, memorabilia, collections	orints, or other artwork; books, pictures, or other art objects lectibles	s; stamp, coir	n, or baseball card collections;
9.	Equipme	ent for sports and hobbies	d other hobby equipment; bicycles, pool tables, golf clubs,	skis; canoes	and kayaks; carpentry tools;
		Describe			
10	□ No	ns bles: Pistols, rifles, shotguns, ammuniti Describe	ion, and related equipment		
		two shotguns			\$200.00
_		·			
11	☐ No		ats, designer wear, shoes, accessories		
		clothing			\$400.00
_					
12	■ No		ry, engagement rings, wedding rings, heirloom jewelry, wat	ches, gems,	gold, silver
13		rm animals oles: Dogs, cats, birds, horses			
		Describe			
14	4. Any oth		you did not already list, including any health aids you d	lid not list	
	■ No □ Yes.	Give specific information			
		•			
1		he dollar value of all of your entries	from Part 3, including any entries for pages you have	attached	\$3,450.00

Debtor 1 Debtor 2	Robert A. Roll Cindy N. Rollii			Case number (if known)	
	escribe Your Financia				
Do you o	wn or have any leg	al or equitable interest	t in any of the following?	Current value of the portion you own? Do not deduct secundaries or exemption	e ured
■ No	,		r home, in a safe deposit box, and on ha	nd when you file your petition	
			accounts; certificates of deposit; shares in unts with the same institution, list each.	n credit unions, brokerage houses, and other similar	٢
			Institution name:		
		17.1. checking	Trustmark	\$20	00.00
		publicly traded stocks vestment accounts with	s brokerage firms, money market account	ts	
☐ Yes.		Institution or issu	uer name:		
joint v ■ No	venture	tk and interests in incommation about them Name of entity:		sses, including an interest in an LLC, partnership % of ownership:	p, and
Negor Non-r ■ No	<i>tiable instrument</i> s in	ate bonds and other ne clude personal checks, nts are those you cannot	egotiable and non-negotiable instrum- cashiers' checks, promissory notes, and transfer to someone by signing or delive	ents I money orders.	
	ment or pension action action in IRA		c), 403(b), thrift savings accounts, or other	er pension or profit-sharing plans	
☐ Yes.	List each account s	separately. Type of account:	Institution name:		
Your s Exam		deposits you have made	e so that you may continue service or use nt, public utilities (electric, gas, water), te	e from a company elecommunications companies, or others	
■ No □ Yes.			Institution name or individual:		
23. Annui ■ No	ties (A contract for a	a periodic payment of m	oney to you, either for life or for a number	er of years)	
	Issu	er name and description	n.		
		IRA, in an account in a 9A(b), and 529(b)(1).	a qualified ABLE program, or under a	qualified state tuition program.	
	Insti	tution name and descrip	otion. Separately file the records of any ir	nterests.11 U.S.C. § 521(c):	
■ No		re interests in property mation about them	(other than anything listed in line 1),	and rights or powers exercisable for your benef	fit

Debtor 1 Debtor 2	Robert A. Rollins Cindy N. Rollins		Case number (if	known)	
Exam ■ No		e secrets, and other intellectual pr sites, proceeds from royalties and lic nem			
	ses, franchises, and other gener nples: Building permits, exclusive lie	al intangibles censes, cooperative association hold	dings, liquor licenses, professiona	ıl licenses	
☐ Yes	. Give specific information about the	nem			
Money or	r property owed to you?			Current valu portion you Do not deduc claims or exe	own? ct secured
□ No	efunds owed to you Give specific information about the	nem, including whether you already f	iled the returns and the tax years		
		federal tax refund	federal ta	x refund \$	\$10,000.00
		Earned Income tax refund	Earned In refun	acome tax	\$10,000.00
		State tax refund	State tax	refund \$	\$10,000.00
■ No		ny, spousal support, child support, m	aintenance, divorce settlement, p	roperty settlement	
	amounts someone owes you nples: Unpaid wages, disability insu benefits; unpaid loans you m	urance payments, disability benefits, adde to someone else	sick pay, vacation pay, workers'	compensation, Social Sec	urity
■ No □ Yes	. Give specific information				
Exam	ests in insurance policies apples: Health, disability, or life insur	rance; health savings account (HSA)	; credit, homeowner's, or renter's	insurance	
■ No □ Yes	. Name the insurance company of Company r		Beneficiary:	Surrender o value:	r refund
If you some No	nterest in property that is due your are the beneficiary of a living trust cone has died. Give specific information	u from someone who has died c, expect proceeds from a life insurar	nce policy, or are currently entitled	I to receive property becau	ıse
Exam ■ No		or not you have filed a lawsuit or utes, insurance claims, or rights to so			

22-01937-KMS Dkt 3 Filed 09/22/22 Entered 09/22/22 11:16:40 Page 8 of 43

	otor 1 otor 2	Robert A. Rollins Cindy N. Rollins		Case number (if known)	
	Other c	ontingent and unliquidated claims of every nature, inclu	ıding counterclaims	of the debtor and rights to se	t off claims
	Yes.	Describe each claim			
35.	Any fin	ancial assets you did not already list			
	No				
	☐ Yes.	Give specific information			
36.		ne dollar value of all of your entries from Part 4, includir rt 4. Write that number here			\$30,200.00
Part	5: Des	cribe Any Business-Related Property You Own or Have an Intel	rest In. List any real esta	ate in Part 1.	
37. C	Do you o	wn or have any legal or equitable interest in any business-relat	ed property?		
	No. Go	to Part 6.			
	Yes. G	o to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You bu own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. l	Do you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	■ No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
53.		have other property of any kind you did not already list les: Season tickets, country club membership	?		
	No				
L	⊿ Yes. (Give specific information			
54.	Add tl	ne dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$40,000.00
56.		: Total vehicles, line 5	\$7,900.00		
57.	Part 3	: Total personal and household items, line 15	\$3,450.00		
58.	Part 4	: Total financial assets, line 36	\$30,200.00		
59.		: Total business-related property, line 45	\$0.00		
60.		: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$41,550.00	Copy personal property total	\$41,550.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62		_	\$81,550.00

Debtor 1	Robert A. Rollins			
	First Name	Middle Name	Last Name	
Debtor 2	Cindy N. Rollins			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI	
Case number				
(if known)				☐ Check if this is an amended filing
(II KIIOWII)				
	orm 106C			
	orm 106C			

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a

any fun exe	y applicable statutory limit. Some exemption ds—may be unlimited in dollar amount. How emption to a particular dollar amount and the che applicable statutory amount.	s—such as those for vever, if you claim an	heal exen	th aids, rights to receive certain b nption of 100% of fair market valu	penefits, and tax-exempt retirement us under a law that limits the
Pa	rt 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming?	? Check one only, ever	n if yc	our spouse is filing with you.	
	■ You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 L	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.		
	81 Katie Trail SE Bogue Chitto, MS 39629 Lincoln County	\$40,000.00		\$40,000.00	Miss. Code Ann. § 85-3-21
	Co-debtor has 1/3 interest in land, mobile home owned outright by both Debtors Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	2000 Mazda Line from Schedule A/B: 3.2	\$2,000.00		\$2,000.00	Miss. Code Ann. § 85-3-1(a)
	Line Holli Schedule AVB. 3.2			100% of fair market value, up to any applicable statutory limit	
	lawn mower Line from Schedule A/B: 4.2	\$2,200.00		\$1,200.00	Miss. Code Ann. § 85-3-1(a)
	Line Holli Schedule AVB. 4.2			100% of fair market value, up to any applicable statutory limit	
	furniture & household goods Line from Schedule A/B: 6.1	\$2,200.00		\$2,200.00	Miss. Code Ann. § 85-3-1(a)
	LINE HOTH SCHEdule AVB. 0.1			100% of fair market value, up to any applicable statutory limit	

De	ebtor 2 Cindy N. Rollins			Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim Specific laws that allow exemption you own				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	various electronics Line from Schedule A/B: 7.1	\$650.00		\$650.00	Miss. Code Ann. § 85-3-1(a)	
	Zine nem estredate /v Zi 111			100% of fair market value, up to any applicable statutory limit		
	two shotguns Line from Schedule A/B: 10.1	\$200.00		\$200.00	Miss. Code Ann. § 85-3-1(a)	
	Line nom <i>Schedule AVB</i> . 10.1			100% of fair market value, up to any applicable statutory limit		
	clothing Line from Schedule A/B: 11.1	\$400.00		\$400.00	Miss. Code Ann. § 85-3-1(a)	
	Line Ironi Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit		
	federal tax refund: federal tax refund Line from Schedule A/B: 28.1	\$10,000.00		\$10,000.00	Miss. Code Ann. § 85-3-1(j)	
	Line Ironi Schedule AVB. 20.1			100% of fair market value, up to any applicable statutory limit		
	Earned Income tax refund: Earned Income tax refund	\$10,000.00		\$10,000.00	Miss. Code Ann. § 85-3-1(i)	
	Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit		
	State tax refund: State tax refund Line from Schedule A/B: 28.3	\$10,000.00		\$10,000.00	Miss. Code Ann. § 85-3-1(k)	
	Line nom <i>Schedule Alb.</i> 20.0			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)					
	■ No					
	☐ Yes. Did you acquire the property covere	ed by the exemption w	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

Debtor 1 Robert A. Rollins

Fill in this informat	tion to identify your	case:				
Debtor 1	Robert A. Rollins	3				
-	First Name	Middle Name	Last Name			
_	Cindy N. Rollins First Name	Middle Name	Last Name			
, 3,						
United States Bankr	uptcy Court for the:	SOUTHERN DISTRICT OF MIS	551551PPI			
Case number						
(if known)					_	if this is an led filing
						led illing
Official Form 1	<u>106D</u>					
Schedule D	: Creditors	Who Have Claims S	Secure	ed by Property		12/15
		two married people are filing togetheut, number the entries, and attach it t				
1. Do any creditors ha	ve claims secured by	your property?				
☐ No. Check th	is box and submit th	is form to the court with your other	schedules.	You have nothing else to	report on this form.	
Yes. Fill in all	l of the information b	elow.				
Part 1: List All S	Secured Claims					
for each claim. If more	than one creditor has	ore than one secured claim, list the crec a particular claim, list the other creditors al order according to the creditor's name	in Part 2. As	ely S Amount of claim Do not deduct the	Column B Value of collateral that supports this	Column C Unsecured portion
2.1 Advantage F	Financial Sv	Describe the property that secures the	he claim:	value of collateral. \$1,632.00	\$2,200.00	If any \$432.00
Creditor's Name		lawn mower		<u> </u>		
714 Brookw	av Rivd	As of the date you file, the claim is:	Check all that			
Brookhaven		apply. Contingent				
Number, Street, Cit	y, State & Zip Code	Unliquidated				
VA/In a service of the selection	2 01 1	Disputed				
Who owes the debt? Debtor 1 only	Check one.	Nature of lien. Check all that apply. ☐ An agreement you made (such as n		and a surround		
Debtor 2 only		car loan)	nongage or s	secureu		
■ Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, med	hanic's lien)			
☐ At least one of the o	debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim	n relates to a	Other (including a right to offset)	Non-Pur	chase Money Security		
community debt						
Date debt was incurre	ed	Last 4 digits of account numb	er			
2.2 Kubota Cred	4i+	Describe the property that secures the	he claim:	\$1,000.00	\$2,200.00	\$0.00
Creditor's Name		lawn mower	ne ciann.	<u>φ1,000.00</u>	φ2,200.00	φυ.υυ
14841 Dallas	s Pkwy	As of the date you file, the claim is: (Check all that			
Ste 425 Dallas, TX 7	5254-8067	apply. Contingent				
	y, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as n car loan)	nortgage or s	secured		
■ Debtor 1 and Debtor	or 2 only	☐ Statutory lien (such as tax lien, med	hanic's lien)			
☐ At least one of the o	•	☐ Judgment lien from a lawsuit				
Check if this claim community debt			Purchase	e Money Security		
Date debt was incurre	ed.	Last 4 digits of account numb	er			

Debtor 1 Robert A. Rollins		Case	number (if known)		
First Name Middle Na	ame Last Name	_	_		
Debtor 2 Cindy N. Rollins		_			
First Name Middle Na	ame Last Name				
Delevie Financial	Describe the assessment that assessment	the eleter	£4.000.00	¢4 200 00	£2.400.00
2.3 Polaris Financial Creditor's Name	Describe the property that secures	tne claim:	\$4,688.00	\$1,200.00	\$3,488.00
Creditor's Name	4 wheeler				
470 Ole Werthington Dd					
470 Ole Worthington Rd Ste 450	As of the date you file, the claim is:	: Check all that			
Westerville, OH 43082	apply.				
	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.				
_					
☐ Debtor 1 only	An agreement you made (such as car loan)	mortgage or secured			
Debtor 2 only	☐ Statutory lien (such as tax lien, me	achanic's lion)			
■ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another	☐ Judgment lien from a lawsuit	scriatile 3 liett)			
☐ Check if this claim relates to a	_	Purchase Mon	ev Security		
community debt	Other (including a right to offset)	- urchase mon	ey occurry		
Date debt was incurred	Last 4 digits of account num	nhar			
Date dept was incurred	Last 4 digits of account num				
2.4 Republic Finance, LLC	Describe the property that secures	the claim:	\$4,000.00	\$2,500.00	\$1,500.00
Creditor's Name	2007 Ford Explorer				· ,
c/o CT Corp. System	As of the data way file the plains in				
645 Lakeland E Dr #101	As of the date you file, the claim is: apply.	: Check all that			
Flowood, MS 39232-9099	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as	mortgage or secured	1		
Debtor 2 only	car loan)	ga.ga ar aasara			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	Non-Purchase	Money Security		
community debt					
Date debt was incurred	Last 4 digits of account nun	nber			
				_	
Add the dollar value of your entries in C			\$11,320.00	<u>)</u>	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages	i.	\$11,320.00		
				_	
Part 2: List Others to Be Notified fo	r a Debt That You Already Listed	<u>t</u>			
Use this page only if you have others to b trying to collect from you for a debt you o than one creditor for any of the debts that debts in Part 1, do not fill out or submit the	we to someone else, list the creditor you listed in Part 1, list the addition	in Part 1, and then I	ist the collection agency	here. Similarly, if yo	u have more
[]					
Name, Number, Street, City, State &	Zip Code	On which lin	e in Part 1 did you enter th	ne creditor? 2.3	
Performance Finance 10509 Professional Cir		1 ==4 4 =10 9	of a account normal and		
Reno, NV 89521		Last 4 digits	of account number		

E'll in this into				
	rmation to identify your	case:		
Debtor 1	Robert A. Rollins	ACTO N		
Dahtar 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Cindy N. Rollins First Name	Middle Name	Last Name	
(
United States E	Bankruptcy Court for the:	SOUTHERN DISTR	ICT OF MISSISSIPPI	
Case number				
(if known)				Check if this is an
				amended filing
Official For				
Schedule	E/F: Creditors W	ho Have Unse	ecured Claims	12/15
Schedule G: Exec Schedule D: Cred left. Attach the Co name and case n	cutory Contracts and Unexp ditors Who Have Claims Sec ontinuation Page to this pag umber (if known).	ired Leases (Official Fo ured by Property. If moi je. If you have no inform	aim. Also list executory contracts on Schedule A/B: Property (Officem 106G). Do not include any creditors with partially secured claim re space is needed, copy the Part you need, fill it out, number the enation to report in a Part, do not file that Part. On the top of any add	s that are listed in ntries in the
	All of Your PRIORITY Ur			
	itors have priority unsecure	d claims against you?		
No. Go to	Part 2.			
☐ Yes.				
Part 2: List	All of Your NONPRIORIT	V Unacquied Claima		
	itors have nonpriority unsec	-		
☐ No. You h	nave nothing to report in this p	art. Submit this form to th	e court with your other schedules.	
Yes.				
unsecured cla	aim, list the creditor separatel	y for each claim. For each	l order of the creditor who holds each claim. If a creditor has more the claim listed, identify what type of claim it is. Do not list claims already in art 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
				Total claim
4.1 1st Fr	anklin Financial	Last 4 d	ligits of account number	\$2,100.00
	rity Creditor's Name			
	artin B. Miskelly N Main St Ste D	When w	as the debt incurred?	<u> </u>
Tupelo	o, MS 38803			
	Street City State Zip Code	As of th	e date you file, the claim is: Check all that apply	
_	curred the debt? Check one.			
☐ Debt	or 1 only	☐ Cont	ingent	
☐ Debt	or 2 only	☐ Unlic	uidated	
Debt	or 1 and Debtor 2 only	☐ Disp	uted	
☐ At lea	ast one of the debtors and an	other Type of	NONPRIORITY unsecured claim:	
☐ Ched	ck if this claim is for a com	munity	ent loans	
debt		☐ Oblig	pations arising out of a separation agreement or divorce that you did not	
	laim subject to offset?		s priority claims	
No			s to pension or profit-sharing plans, and other similar debts	
☐ Yes		Othe	r. Specify signature loan(s)	

	r 2 Cindy N. Rollins	Case number (if known)	
4.2	Advantage Fin Svcs	Last 4 digits of account number	\$1,400.00
	Nonpriority Creditor's Name 824 SWRailroad Ave Ste A	When was the debt incurred?	
	Hammond, LA 70403 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	Debtor 2 only	☐ Contingent ☐ Unliquidated	
	Debtor 1 and Debtor 2 only	<u> </u>	
	_	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify signature loan(s)	
4.3	Family Choice Fin. c/o Nonpriority Creditor's Name	Last 4 digits of account number	\$770.00
	Robin M Rush-Hutson 3208 Service Dr Ste E Pearl, MS 39208	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify signature loan(s)	
4.4	First Heritage Credit	Last 4 digits of account number	\$2,700.00
	Nonpriority Creditor's Name	When we the debt is some do	
	c/o Julie P. Ratliff 605 Crescent Blvd	When was the debt incurred?	
	Ridgeland, MS 39157		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify signature loan(s)	

	¹ Cindy N. Rollins	Case number (if known)			
4.5	Franklin Service, Inc	Last 4 digits of account number	\$7,000.00		
	Nonpriority Creditor's Name PO Box 3910 Tupelo, MS 38803	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify medical bill(s)			
4.6	KDMC Children's Clinic	Last 4 digits of account number	\$8,000.00		
	Nonpriority Creditor's Name		<u> </u>		
	509 Brookman Dr Brookhaven, MS 39601	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •			
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specifymedical bill(s)			
4.7	Performance Finance	Last 4 digits of account number	\$4,700.00		
	Nonpriority Creditor's Name 10509 Professional Cir	When was the debt incurred?			
	Reno, NV 89521 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	76 of the date yearing, the claim io. Chock all that apply			
	Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other Specify signature loan(s)			

	Debtor 1 Robert A. Rollins Debtor 2 Cindy N. Rollins Case number (if known)		
4.8	Republic Finance, LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	c/o CT Corp. System 645 Lakeland E Dr #101 Flowood, MS 39232-9099	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 14000	
4.9	Southwest Mississippi	Last 4 digits of account number	\$3,500.00
	Nonpriority Creditor's Name Regional Medical Cente P.O. Box 490	When was the debt incurred?	
	McComb, MS 39649-0490 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	☐ Contingent	
	_	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical bill(s)	
4.1	St. Dominic Hospital		¢4,000,00
0	Nonpriority Creditor's Name	Last 4 digits of account number	\$4,000.00
	P.O. Box 321472 Flowood, MS 39232-1472	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify medical bill(s)	

	or 1 Robert A. Rollins or 2 Cindy N. Rollins		Case n	umber (i	f known)	
4.1	United Credit Corp	Last 4 digits of account	t number			\$1,400.00
1	Nonpriority Creditor's Name c/o John Simpson 214 Key Dr. Ste 1400	When was the debt incu			_	
	Madison, MS 39110 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, t	the claim is: Chec	k all that a	apply	
	Debtor 1 only	По и				
	Debtor 2 only	☐ Contingent☐ Unliquidated☐				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY	unsecured claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims			or divorce that you did not	i
	No	☐ Debts to pension or pr	•		r similar debts	
	Yes	Other. Specify sign	nature loan(s)			_
Part 3	List Others to Be Notified About a D	ebt That You Already Lister	d			
is try	this page only if you have others to be notified ying to collect from you for a debt you owe to e more than one creditor for any of the debts the fied for any debts in Parts 1 or 2, do not fill out	someone else, list the original on the control of t	creditor in Parts 1	or 2, the	n list the collection ager	ncy here. Similarly, if you
	and Address	On which entry in Part 1 or Part	· —	•		
_	's Daughters oital c/o David Ed	Line 4.6 of (Check one):			with Priority Unsecured C	
	Box 458		■ Part 2:	Creditors	with Nonpriority Unsecure	d Claims
Paris	s, TN 38242	Last 4 digits of account number	PL.			
Name	and Address	On which entry in Part 1 or Part	rt 2 did you list the o	original cr	editor?	
	s Daughter Pro	Line 4.6 of (Check one):	•	•	with Priority Unsecured C	laims
	sthesia Box 1547		Part 2:	Creditors	with Nonpriority Unsecure	ed Claims
_	alia, MO 65302-1547					
		Last 4 digits of account number	:r 			
	and Address	On which entry in Part 1 or Part	· —	•		
_	s Daughters ical Center	Line 4.6 of (Check one):			with Priority Unsecured C	
P.O.	Box 948		■ Part 2:	Creditors	with Nonpriority Unsecure	d Claims
Broo	khaven, MS 39601	Last 4 digits of account number	er			
	10.11	0 111 1 1 0 11			Pr. O	
	and Address hell, McNutt & Sam	On which entry in Part 1 or Part Line 4.6 of (<i>Check one</i>):			editor? with Priority Unsecured C	laims
_	Box 466				with Nonpriority Unsecure	
Tupe	elo, MS 38802-0466	Last 4 digits of account number			, , , , , , , , , , , , , , , , , , , ,	
Name	and Address	On which entry in Part 1 or Part	rt 2 did you list the o	original cr	editor?	
	ed Credit of	Line 4.11 of (<i>Check one</i>):			with Priority Unsecured C	
	okhaven Brookway Blvd.		Part 2:	Creditors	with Nonpriority Unsecure	ed Claims
	okhaven, MS 39601					
		Last 4 digits of account number	r			
Part 4	4: Add the Amounts for Each Type of U	Unsecured Claim				
	al the amounts of certain types of unsecured c of unsecured claim.	laims. This information is for st	tatistical reporting	purpose	es only. 28 U.S.C. §159. <i>F</i>	add the amounts for each
71					Total Claim	
	6a. Domestic support obligatio	ns	6a.	\$	0.0	0

Schedule E/F: Creditors Who Have Unsecured Claims

ebtor 2 Cinc	uy N.	KOIIIIS	Case III	umber (if knowi	
otal aims					
m Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	otal Claim
	6f.	Student loans	6f.	\$	0.00
s Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	Ψ	0.00
	oi.	here.	Oi.	\$	35,570.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	35,570.00

Fill in this information to identify your case:						
Debtor 1	Robert A. Rollins					
	First Name	Middle Name	Last Name			
Debtor 2	Cindy N. Rollins					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF MISSISSIPPI			
Case number						Check if this is an
						amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the , Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Oldio	Zii Oodc	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	_ · · ,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

22-01937-KMS Dkt 3 Filed 09/22/22 Entered 09/22/22 11:16:40 Page 20 of 43

Fill in this	information to identify your	case:			
Debtor 1	Robert A. Rollins				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	Cindy N. Rollins First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case numb	ber				
(if known)					☐ Check if this is an amended filing
	10011				amonada iiinig
	l Form 106H I ule H: Your Cod	obtors			40/45
<u>schea</u>	ule n. Your Cou	eptors			12/15
Arizon	h in the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. s. Did your spouse, former spor	, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		
in line Form	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed t	g with you. List the person shown ne creditor on Schedule D (Officia Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D. lin	e
	Name			☐ Schedule E/F,	
				☐ Schedule G, lin	e
	Number Street			<u> </u>	
	City	State	ZIP Code		
	City	State	ZIP Code		
3.2		State	ZIP Code	Schedule D, lin	
3.2	Name	State	ZIP Code	□ Schedule D, lin □ Schedule E/F, □ Schedule G, lin	ine
3.2		State	ZIP Code	☐ Schedule E/F,	ine

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

Fill in this informat	ion to identify your case:	
Debtor 1	Robert A. Rollins	
Debtor 2 (Spouse, if filing)	Cindy N. Rollins	_
United States Ban	kruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official For	rm 106l I: Your Income	13 income as of the following date: MM / DD/ YYYY

15

0.00

0.00

0.00

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	F	■ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed
	employers.	Occupation	Stacker	
	Include part-time, seasonal, or self-employed work.	Employer's name	Lincoln Lumber	
	Occupation may include student or homemaker, if it applies.	Employer's address	County Farm Road Brookhaven, MS 39601	
		How long employed the	nere? 2 years	

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,370.89 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 3,370.89

Schedule I: Your Income Official Form 106I page 1

Debto Debto		Robert A. Rollins Cindy N. Rollins	_	Case	e number (<i>if known</i>)			
				Fo	r Debtor 1		For Debtor		
(Сор	y line 4 here	4.	\$_	3,370.89	_ ;	\$	0.00	-
5.	List	all payroll deductions:							
1	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	489.53	_	\$	0.00	_
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	_	\$	0.00	-
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	_	\$	0.00	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$_ \$	0.00	_	\$ \$	0.00	_
	эе. 5f.	Domestic support obligations	5e. 5f.	\$ \$	205.56 0.00	_	\$	0.00	-
	5g.	Union dues	5g.	\$	0.00	_	\$	0.00	-
	5h.	Other deductions. Specify:	5h.+		0.00	_	:	0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	695.09	_) :	\$	0.00	-
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,675.80	_	\$	0.00	-
	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	90	•		_			-
	8b.	monthly net income. Interest and dividends	8a. 8b.	\$ \$	0.00	_	\$ \$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_ \$_	0.00	_	\$	0.00	=
,	8d.	Unemployment compensation	8d.	\$_	0.00	_	\$	0.00	_
	8e.	Social Security	8e.	\$_	0.00	<u> </u>	\$	869.00	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00) ;	\$	0.00	
1	8g.	Pension or retirement income	 8g.	\$_	0.00		\$	0.00	_
	8h.	Other monthly income. Specify:	_ 8h.+	• \$_	0.00	+ :	\$	0.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00) :	\$	869.0	0
		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,675.80 +	\$	869.00	= \$	3,544.80
(Incluothe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your rifiends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•		in <i>Schedule</i>	∋ J. +\$	0.00
,		the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certainies						\$	3,544.80
								Combi	ned y income
13.	Do y ■	you expect an increase or decrease within the year after you file this form No.	?					month	y income
	_								

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	our case:							
Deb	otor 1	Robert A. Ro	ollins			Chec	k if this is:			
						An amended filing				
	otor 2 ouse, if filing)	Cindy N. Ro	llins			A supplement showing postpetition chapter 13 expenses as of the following date:				
Unit	ted States Bankı	ruptcy Court for the	: SOUTH	IERN DISTRICT OF MISSI	SSIPPI	-	MM / DD / YYYY			
	se number									
(If k	nown)									
Of	fficial Fo	rm 106J								
S	chedule	J: Your	Exper	ises				12/15		
info	ormation. If m		eded, atta	If two married people are ch another sheet to this t n.						
Par 1.	t 1: Desci	ribe Your House	hold							
٠.	□ No. Go to									
	_		in a separ	ate household?						
	■ N		u оори.							
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debt	tor 2.			
2.	Do you hav	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?		
	Do not state							□ No		
	dependents	names.						☐ Yes		
								□ No □ Yes		
								□ No		
								□ Yes		
								□ No		
								☐ Yes		
3.	expenses o	penses include f people other t d your depende	han $_{m \Box}$	No Yes						
		nate Your Ongoi								
exp	timate your ex penses as of a plicable date.	a date after the l	our bankr bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this fo lemental <i>Schedule</i>	orm as a su J, check th	pplement in a Cha le box at the top o	pter 13 case to report f the form and fill in the		
				government assistance if						
	ficial Form 10		a nave inc	luded it on Schedule I: Y	our income		Your expe	enses		
4.		or home owners		ses for your residence. In r lot.	nclude first mortgage	4. \$		0.00		
	If not includ	ded in line 4:								
	4a. Real	estate taxes				4a. \$		0.00		
		erty, homeowner's				4b. \$		0.00		
			•	ipkeep expenses		4c. \$		50.00		
5.		eowner's associat		dominium dues our residence , such as hoi	me equity loans	4d. \$ 5. \$		0.00 0.00		
٠.			· • · y ·		oquity lourio	σ. ψ		0.00		

	otor 1 otor 2	Robert A. Rollins Cindy N. Rollins	Case num	ber (if known)	
6.	Utilit				
	6a.	Electricity, heat, natural gas	6a.	\$	200.00
	6b.	Water, sewer, garbage collection	6b.	\$	80.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	140.00
	6d.	Other. Specify:	6d.	\$	0.00
7.	Food	l and housekeeping supplies	7.	\$	779.00
8.	Child	dcare and children's education costs	8.	\$	0.00
9.		ning, laundry, and dry cleaning	9.	\$	161.00
10.	Pers	onal care products and services	10.	\$	82.00
11.	Medi	ical and dental expenses	11.	\$	140.00
12.		sportation. Include gas, maintenance, bus or train fare.	40	Φ.	180.00
		ot include car payments.	12.	· ·	
		rtainment, clubs, recreation, newspapers, magazines, and books	13.	·	10.00
		itable contributions and religious donations	14.	\$	0.00
15.		rance.			
		ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a.	¢	0.00
		Health insurance	15a. 15b.	·	0.00
				·	0.00
		Vehicle insurance	15c.	·	154.00
40		Other insurance. Specify:	15d.	>	0.00
	Spec	·	16.	\$	0.00
17.		Illment or lease payments: Car payments for Vehicle 1	17a.	¢	435.00
				·	
		Car payments for Vehicle 2			162.00
		Other Specify: kubota	17c.	\$	86.00
40		Other. Specify:	17d.	>	0.00
	dedu	r payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	0.00
19.		r payments you make to support others who do not live with you.	40	\$	0.00
20	Spec	er real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>	19.	our Incomo	
20.		Mortgages on other property	20a.		0.00
		Real estate taxes	20a. 20b.	· -	0.00
		Property, homeowner's, or renter's insurance	20b. 20c.	·	
			20d.	·	0.00
		Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues		·	0.00
04			20e.	·	0.00
21.	Otne	r: Specify: social security exempt	21.	+\$	869.00
22.	Calc	ulate your monthly expenses			
	22a.	Add lines 4 through 21.		\$	3,528.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
		Add line 22a and 22b. The result is your monthly expenses.		\$	3,528.00
23.	Calc	ulate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,544.80
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	3,528.00
					·
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	16.80
24.	For exmodif				e or decrease because of a
	☐ Ye	es. Explain here:			

Fill in this infor	rmation to identify your	case:		
Debtor 1	Robert A. Rollins			
DODIO! !	First Name	Middle Name	Last Name	_
Debtor 2	Cindy N. Rollins			
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI	
Case number				
(if known)				☐ Check if this is an amended filing
You must file th	is form whenever you fi	le bankruptcy schedules		on. se statement, concealing property, or \$250,000, or imprisonment for up to 20
Sig	ın Below			
	ay or agree to pay some	one who is NOT an atto	ney to help you fill out bankruptcy for	rms?
■ No				1.5.4.4.5.22
∐ Yes.	Name of person			ch Bankruptcy Petition Preparer's Notice, laration, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed with this de	claration and
X /s/ Rol	bert A. Rollins		X /s/ Cindy N. Rollins	
	t A. Rollins		Cindy N. Rollins	
Signatu	ure of Debtor 1		Signature of Debtor 2	
Date	September 22, 2022		Date September 22, 2	022

Fill in	this inforr	nation to identify you	r case:			
Debto	or 1	Robert A. Rollin	S			
5.1.		First Name	Middle Name	Last Name		
Debto (Spouse	or 2 e if, filing)	Cindy N. Rollins First Name	Middle Name	Last Name		
United	d States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT (OF MISSISSIPPI		
_		intropiety Court for the.	- COOTILITIES OF CONTROL OF CO			
Case (if know	number _{m)}					heck if this is an mended filing
		rm 107				
Stat	ement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/22
inform	nation. If mer (if know	nore space is needed, n). Answer every ques	attach a separate sheet to	this form. On the top of any	equally responsible for supp additional pages, write you	
	•	r current marital statu		Liveu Belore		
	■ Married					
_						
2. D	uring the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No ■ Yes. Lis	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now	·.	
[Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No ■ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explai	n the Sources of You	r Income			
F	ill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
] No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$30,000.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

	Robert A. Ro Sindy N. Ro	-			Case number (if known)		
			Dalitan 4		Dalitano		
			Sources of income Check all that apply.	Gross income (before deductions an exclusions)	Sources of ind Check all that a		Gross income (before deductions and exclusions)
For last cale (January 1 t	endar year: o December	31, 2021)	■ Wages, commissions, bonuses, tips	\$28,000.0	00 ☐ Wages, con bonuses, tips	ımissions,	\$0.00
			☐ Operating a business		☐ Operating a	business	
	ndar year be o December		■ Wages, commissions, bonuses, tips	\$15,000.0	OO ☐ Wages, con bonuses, tips	ımissions,	\$0.00
			☐ Operating a business		Operating a	business	
□ No	s. Fill in the de		me from each source separa	tery. Do not include incor	ne mat you listed in ill	IC 4.	
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions ar exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
	ry 1 of curre ı filed for baı			\$0.0	00 monthly soc security	ial	\$869.00
	er Debtor 1's Neither D individual	or Debtor 2 ebtor 1 nor Dorimarily for a	Made Before You Filed for s debts primarily consume ebtor 2 has primarily consu- personal, family, or househo	r debts? umer debts. Consumer of ld purpose."			1(8) as "incurred by an
	During the No.	Go to line 7	each creditor to whom you pai	id a total of \$7,575* or mo	ore in one or more pa	yments and th	
	* Subject	not include	editor. Do not include paymer payments to an attorney for t on 4/01/25 and every 3 year	his bankruptcy case.	-		•
■ Yes			r both have primarily consure you filed for bankruptcy, di		total of \$600 or more	?	
	■ No. □ Yes	include pay	each creditor to whom you pa ments for domestic support o this bankruptcy case.				
Credito	or's Name an	d Address	Dates of payme	ent Total amoun		Was this p	payment for

22-01937-KMS Dkt 3 Filed 09/22/22 Entered 09/22/22 11:16:40 Page 28 of 43

	btor 2 Cindy N. Rollins		Cas	e number (if known)		
7.	Within 1 year before you filed for bankr Insiders include your relatives; any general of which you are an officer, director, perso a business you operate as a sole proprieto alimony.	Il partners; relatives of any ger n in control, or owner of 20% o	neral partners; partne or more of their voting	erships of which yog g securities; and a	ou are a general iny managing ag	partner; corporations gent, including one fo
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankr insider? Include payments on debts guaranteed or		ments or transfer a	nny property on a	ccount of a de	bt that benefited an
	NoYes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
Pai	rt 4: Identify Legal Actions, Reposses	sions, and Foreclosures				
9.	Within 1 year before you filed for bankr List all such matters, including personal in modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Nature of the case Court or agency		Status of the	e case
	KDMC v. Debtors	collections			■ Pending □ On appea □ Conclude	
10.	Within 1 year before you filed for bankr Check all that apply and fill in the details b		erty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happene	d			property
11.	Within 90 days before you filed for bank accounts or refuse to make a payment No Yes. Fill in the details.		cluding a bank or fir	nancial institution	ા, set off any aા	mounts from your
	☐ Yes. Fill in the details. Creditor Name and Address	Describe the action the	e creditor took	Date	action was	Amount
	Orealtor Name and Address	bescribe the action the	e creditor took	taker		Amount
12.	Within 1 year before you filed for bankr court-appointed receiver, a custodian, o		erty in the possess	ion of an assigne	e for the benef	it of creditors, a
	Yes					
	_ 100					

	btor 1 btor 2	Cindy N. Rollins	Case numbe	r (if known)	
Pa	rt 5:	List Certain Gifts and Contributions			
13.		in 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	otcy, did you give any gifts with a total value of more	than \$600 per person	?
	Gifts per	s with a total value of more than \$600 person son to Whom You Gave the Gift and	Describe the gifts	Dates you gave the gifts	Value
4.4		ress:	atou did you give only gifte ay contributions with a to-	tal value of more than	¢coo to any abority?
14.		in 2 years before you filed for bankrup No Yes. Fill in the details for each gift or cor	otcy, did you give any gifts or contributions with a to	tal value of more than	\$600 to any charity?
	Gifts more Cha	s or contributions to charities that tot e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Pa	rt 6:	List Certain Losses			
15.	or ga	in 1 year before you filed for bankrupt ambling? No Yes. Fill in the details.	tcy or since you filed for bankruptcy, did you lose an	ything because of thef	t, fire, other disaster
		the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7:	List Certain Payments or Transfers			
16.	cons	ulted about seeking bankruptcy or pr	ccy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? eparers, or credit counseling agencies for services require		rty to anyone you
		No			
	•	Yes. Fill in the details.			
	Add Ema	son Who Was Paid Iress ail or website address son Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	840 Ste Jac	hard R. Grindstaff, Attorney E. River Place 605 kson, MS 39202-3441 ndstaf@yahoo.com	Attorney Fees		\$572.00
17.	prom		tcy, did you or anyone else acting on your behalf pay tors or to make payments to your creditors? ou listed on line 16.	or transfer any prope	rty to anyone who
		No			
		Yes. Fill in the details.			
		son Who Was Paid ress	Description and value of any property transferred	Date payment or transfer was	Amount of payment

Dei	biol 2 Cindy N. Rollins			Case number (# known)		
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No	ousiness or financial after a security (such as	fairs? the granting of a s			
	Yes. Fill in the details. Person Who Received Transfer Address	Description and property transfe		Describe any prope payments received		Date transfer was made
	Person's relationship to you			paid in exchange		
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pri ■ No □ Yes. Fill in the details.		ny property to a s	self-settled trust or sim	ilar device of	which you are a
	Name of trust	Description and	value of the prop	erty transferred		Date Transfer was
					r	nade
Pai	tt 8: List of Certain Financial Accounts, In	struments, Safe Depos	it Boxes, and Sto	orage Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial accou	unts; certificates	of deposit; shares in ba	•	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou instrument	nt or Date accour closed, sold moved, or transferred		Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	or bankruptcy, an	y safe deposit box or o	ther deposito	ry for securities,
	No					
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe the contents		Do you still have it?
20	Have your stand an arrest in a standard unit	,	h a aithin 4 .	vaan bafana vaav filad fa	. h al	
22.	Have you stored property in a storage unit	or place other than you	ir nome within 1 y	year before you filed to	: bankruptcy ?	•
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the contents		Do you still have it?
Pai	rt 9: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that so for someone.	omeone else owns? Inc	lude any property	y you borrowed from, a	re storing for,	, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe the property		Value
Pai	rt 10: Give Details About Environmental Inf	ormation				
For	the purpose of Part 10, the following definiti	ons apply:				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Robert A. Rollins

Debtor 1

Debtor 1	Robert A. Rollins
Debtor 2	Cindy N. Rollins

Case number (if known)

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
		means any location, facility, or propertion, operate, or utilize it, including disp	•	•	aw,	whether you now own, operate,	or utilize it or used		
	Haz	rardous material means anything an envardous material, pollutant, contaminant	viro	nmental law defines as a hazardous	was	ste, hazardous substance, toxic s	substance,		
Rep	ort a	II notices, releases, and proceedings th	hat	you know about, regardless of when	the	y occurred.			
24.	Has	any governmental unit notified you that	at y	ou may be liable or potentially liable	und	er or in violation of an environme	ental law?		
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice		
25.	Hav	re you notified any governmental unit of	f an	y release of hazardous material?					
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Hav	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
		No Yes. Fill in the details.							
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case		
Pai	t 11:	Give Details About Your Business or	r Co	nnections to Any Business					
27.	Witl	hin 4 years before you filed for bankrup	otcy	, did you own a business or have any	y of	the following connections to any	/ business?		
		☐ A sole proprietor or self-employed	in a	a trade, profession, or other activity,	eithe	er full-time or part-time			
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership							
		☐ An officer, director, or managing ex	xec	utive of a corporation					
		☐ An owner of at least 5% of the votir	ng d	or equity securities of a corporation					
	No. None of the above applies. Go to Part 12.								
		Yes. Check all that apply above and fil	II in	the details below for each business.					
		siness Name	C	Describe the nature of the business		Employer Identification numbe			
		dress mber, Street, City, State and ZIP Code)	N	lame of accountant or bookkeeper		Do not include Social Security	number or IIIN.		
28.		hin 2 years before you filed for bankrup itutions, creditors, or other parties.	otcy	, did you give a financial statement to	o an	Dates business existed your business? Inclu	ude all financial		
		No							
		No Yes. Fill in the details below.							
	Na	me	C	Pate Issued					
		dress mber, Street, City, State and ZIP Code)							

Part 12: Sign Below

22-01937-KMS Dkt 3 Filed 09/22/22 Entered 09/22/22 11:16:40 Page 32 of 43

Debtor 2		Case number (if known)	
with a ba		a false statement, concealing property, or obtaining money or property by fraud in connecti o \$250,000, or imprisonment for up to 20 years, or both.	on
/s/ Rob	ert A. Rollins	/s/ Cindy N. Rollins	
Robert	A. Rollins	Cindy N. Rollins	
Signatu	re of Debtor 1	Signature of Debtor 2	
Date _	September 22, 2022	Date September 22, 2022	
•	attach additional pages to Your Sta	ment of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
No			
☐ Yes			
Did you	pay or agree to pay someone who i	oot an attorney to help you fill out bankruptcy forms?	
■ No			
☐ Yes. I	Name of Person Attach the Ba	rruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

Fill in this infor	rmation to identify your o	case:			
Debtor 1	Robert A. Rollins				
Debtor 2	First Name Cindy N. Rollins	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	SOUTHERN DIST	RICT OF MISSISSIPPI		
Case number					☐ Check if this is an
Official Fo	orm 108				amended filing
			iduals Filing Under C	hapter 7	12/15
	dividual filing under char ve claims secured by you		out this form if:		
■ you have lea You must file th	sed personal property and its form with the court will ever is earlier, unless the	nd the lease has no ithin 30 days after	ot expired. you file your bankruptcy petition or by to time for cause. You must also send co		
	eople are filing together nd date the form.	in a joint case, bot	th are equally responsible for supplying	g correct informa	tion. Both debtors must
write y	your name and case num	nber (if known).	needed, attach a separate sheet to this	form. On the to	p of any additional pages,
1. For any credi			: Creditors Who Have Claims Secured b	y Property (Offic	cial Form 106D), fill in the
information b	reditor and the property th	nat is collateral	What do you intend to do with the prosecures a debt?		Did you claim the property as exempt on Schedule C?
Creditor's name:	Advantage Financial S	Sv	☐ Surrender the property. ☐ Retain the property and redeem it.		□ No
Description o	f lawn mower		Retain the property and enter into a Reaffirmation Agreement.		■ Yes
property securing debt	t:		Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f)	
Creditor's	Kubota Credit		☐ Surrender the property.		□ No
Description o	f lawn mower		☐ Retain the property and redeem it. ■ Retain the property and enter into a		Yes
property securing debi			Reaffirmation Agreement. ☐ Retain the property and [explain]:		
Creditor's I	Polaris Financial		☐ Surrender the property. ☐ Retain the property and redeem it.		□ No
Description o	f 4 wheeler		■ Retain the property and enter into a <i>Reaffirmation Agreement.</i> □ Retain the property and [explain]:		■ Yes

Official Form 108

	otor 1 Robert A. Rollins Otor 2 Cindy N. Rollins	Case number (if known)	
s	securing debt:		-
	Creditor's Republic Finance, LLC	☐ Surrender the property.	□No
n	name:	Retain the property and redeem it.	■ Yes
D	Description of 2007 Ford Explorer	Retain the property and enter into a Reaffirmation Agreement.	_ 100
	property securing debt:	☐ Retain the property and [explain]:	-
For a	t 2: List Your Unexpired Personal Property Leases any unexpired personal property lease that you listed the information below. Do not list real estate leases. Un may assume an unexpired personal property lease if	nexpired leases are leases that are still in effect; the	lease period has not yet ended.
Des	scribe your unexpired personal property leases		Will the lease be assumed?
	ssor's name:		□ No
	scription of leased perty:		☐ Yes
	ssor's name: scription of leased		□ No
	perty:		☐ Yes
	sor's name: scription of leased		□ No
_	perty:		☐ Yes
	sor's name: scription of leased		□ No
	perty:		☐ Yes
	sor's name: scription of leased		□ No
	perty:		☐ Yes
	sor's name: scription of leased		□ No
	perty:		☐ Yes
	sor's name: scription of leased		□ No
	perty:		☐ Yes
Und	er penalty of perjury, I declare that I have indicated my perty that is subject to an unexpired lease.	y intention about any property of my estate that sec	ures a debt and any personal
X	/s/ Robert A. Rollins	X /s/ Cindy N. Rollins	
	Robert A. Rollins Signature of Debtor 1	Cindy N. Rollins Signature of Debtor 2	
	Date September 22, 2022	Date September 22, 2022	

Debtor 1	Robert A. Rollins	
Debtor 2	Cindy N. Rollins	Case number (if known)

Fill in this information to identify your case:	Check one box only as directed in this form and in 122A-1Supp:	Form
Debtor 1 Robert A. Rollins	122/ 10upp.	
Debtor 2 (Spouse, if filing) Cindy N. Rollins	■ 1. There is no presumption of abuse	
United States Bankruptcy Court for the: Southern District of Mississippi Case number	2. The calculation to determine if a presumpti applies will be made under Chapter 7 Mea Calculation (Official Form 122A-2).	
(if known)	☐ 3. The Means Test does not apply now becaud qualified military service but it could apply	
	☐ Check if this is an amended filing	
Official Form 122A - 1		
Chapter 7 Statement of Your Current Monthly	Income	12/19
Be as complete and accurate as possible. If two married people are filing together, both are attach a separate sheet to this form. Include the line number to which the additional inform case number (if known). If you believe that you are exempted from a presumption of abuse qualifying military service, complete and file Statement of Exemption from Presumption of Part 1: Calculate Your Current Monthly Income	nation applies. On the top of any additional pages, write you because you do not have primarily consumer debts or be	our name and ecause of
What is your marital and filing status? Check one only.		
Not married. Fill out Column A, lines 2-11.		
■ Married and your spouse is filing with you. Fill out both Columns A and B	! lines 2-11	
☐ Married and your spouse is NOT filing with you. You and your spouse a		
☐ Living in the same household and are not legally separated. Fill out bo		
Living separately or are legally separated. Fill out Column A, lines 2-11; penalty of perjury that you and your spouse are legally separated under n living apart for reasons that do not include evading the Means Test require	; do not fill out Column B. By checking this box, you de nonbankruptcy law that applies or that you and your spo	
Fill in the average monthly income that you received from all sources, derived during the 101(10A). For example, if you are filing on September 15, the 6-month period would be March the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not spouses own the same rental property, put the income from that property in one column only.	n 1 through August 31. If the amount of your monthly income voot include any income amount more than once. For example, it	aried during
	Column A Column B Debtor 1 Debtor 2 or non-filing spouse	
Your gross wages, salary, tips, bonuses, overtime, and commissions (before payroll deductions).	s 3,370.89 \$ 0.00	

payron adadonorio).							
Alimony and maintenance payments. Do not include Column B is filled in.	payme	ents from	a spouse if	\$	0.00	\$	0.00
of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Includd, your oouse c	e regular depende only if Co	r contributions nts, parents,	\$	0.00	\$	0.00
Net income from operating a business, profession,	or farn						
			otor 1				
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from a business, profession, or far	m \$ _	0.00	Copy here -> \$	S	0.00	\$	0.00
Net income from rental and other real property							
		Deb	otor 1				
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	- \$	0.00					
Net monthly income from rental or other real property	\$	0.00	Copy here -> \$	6	0.00	\$	0.00
Interest, dividends, and royalties	_		;	\$	0.00	\$	0.00
	Column B is filled in. All amounts from any source which are regularly prof you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3. Net income from operating a business, profession, Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or fart income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from rental or other real property	Column B is filled in. All amounts from any source which are regularly paid for of you or your dependents, including child support. Include from an unmarried partner, members of your household, your and roommates. Include regular contributions from a spouse of filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm. Gross receipts (before all deductions) Ordinary and necessary operating expenses Net income from rental and other real property Gross receipts (before all deductions) \$ Crdinary and necessary operating expenses Net income from rental and other real property \$ Crdinary and necessary operating expenses Net monthly income from rental or other real property \$ Section 1.	Column B is filled in. All amounts from any source which are regularly paid for househoof you or your dependents, including child support. Include regular from an unmarried partner, members of your household, your dependent and roommates. Include regular contributions from a spouse only if Coffilled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Detended	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1	Column B is filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1	Column B is filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1	Column B is filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net income from rental and other real property Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net income from rental and other real property Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from rental or other real property Net monthly income from rental or other real property Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from rental or other real property Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from rental or other real property Debtor 1

ebtor 2	Cindy N. Rollins		Case nun	iber (<i>if known</i>)		
			Column 1		Column E Debtor 2 non-filing	
	employment compensation		\$	0.00	\$	0.00
the	not enter the amount if you contend that the amoun Social Security Act. Instead, list it here:		nder			
F	or you \$					
	or your spouse \$	0.00				
ben not Unit disa pay doe	esion or retirement income. Do not include any arefit under the Social Security Act. Also, except as sinclude any compensation, pension, pay, annuity, context of States Government in connection with a disability, or death of a member of the uniformed service paid under chapter 61 of title 10, then include that is not exceed the amount of retired pay to which you tired under any provision of title 10 other than chap	stated in the next sentence, or allowance paid by the ty, combat-related injury or ces. If you received any ret pay only to the extent that u would otherwise be entitl	r ired it	0.00	\$	0.00
10. Inco Do rece dom Unit disa	ome from all other sources not listed above. Sp not include any benefits received under the Social Spived as a victim of a war crime, a crime against hunestic terrorism; or compensation pension, pay, and led States Government in connection with a disability, or death of a member of the uniformed services on a separate page and put the total below.	ecify the source and amou Security Act; payments manity, or international or nuity, or allowance paid by ty, combat-related injury o	int.			
			\$	0.00	\$	0.00
			\$	0.00	\$	0.00
	Total amounts from separate pages, if any.		+ \$	0.00	\$	0.00
	culate your total current monthly income. Add lint to column. Then add the total for Column A to the to be because the many column and the total for Column A to the formula for the Means Test Applies to the formula for the formula f	stal for Column B.	3,370.89	+ \$	0.00	Total current monthly income
12. Cal	culate your current monthly income for the year	. Follow these steps:				
	. Copy your total current monthly income from line		Co	opy line 11	here=>	\$3,370.89
	Multiply by 12 (the number of months in a year)					x 12
12b	. The result is your annual income for this part of th	e form			12	2b. \$ 40,450.68
13. Cal	culate the median family income that applies to	you. Follow these steps:				
Fill	n the state in which you live.	MS				
Fill	n the number of people in your household.	2				
To f	in the median family income for your state and size ind a list of applicable median income amounts, go his form. This list may also be available at the bank	online using the link speci	fied in the sep	arate instruc	13 ctions	\$ 57,148.00
14. Ho v	v do the lines compare?					
14a 14b	Go to Part 3. Do NOT fill out or file Official Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.	Form 122A-2.				
Part 3:	Sign Below					
	By signing here, I declare under penalty of perjury	that the information on thi	s statement ar	nd in any atta	achments is	true and correct.
	X /s/ Robert A. Rollins	X /s/ 0	Cindy N. Rol	lins		
	Robert A. Rollins	Cin	dy N. Rollins			

Robert A. Rollins

Debtor 1

Deptor 1	Robert A. Rollins Cindy N. Rollins		Case number (if known)
	Signature of Debtor 1		Signature of Debtor 2
Date	September 22, 2022 MM / DD / YYYY	Date	September 22, 2022 MM / DD / YYYY
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this t	form.	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Mississippi

In re	Robert A. Rollins Cindy N. Rollins		Case N	D.		
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMI	PENSATION OF ATT	ORNEY FOR I	DEBTOR(S)		
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the rendered on behalf of the debtor(s) in contemplating	016(b), I certify that I am the at filing of the petition in bankrup	torney for the above r	named debtor(s) and that aid to me, for services render	ed or to	
	For legal services, I have agreed to accept		\$	572.00		
	Prior to the filing of this statement I have receive	ved	\$	572.00		
	Balance Due			0.00		
2. \$	338.00 of the filing fee has been paid.					
3. Т	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
4. Т	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
5. I	■ I have not agreed to share the above-disclosed co	ompensation with any other per	son unless they are me	embers and associates of my	law firm.	
ſ	☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the				rm. A	
6. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
b c	 Analysis of the debtor's financial situation, and reference in the preparation and filing of any petition, schedules, Representation of the debtor at the meeting of cree. [Other provisions as needed] Negotiations with secured creditors reaffirmation agreements and applications of the provisions o	statement of affairs and plan we editors and confirmation hearing to reduce to market value; ations as needed; preparate	hich may be required; g, and any adjourned be exemption plannir	nearings thereof;	j of	
7. E	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.			nces. relief from stav ac		
	any other daversary processing.		uulciai lieli avolua	,	ions or	
	any other duverously proceduring.	CERTIFICATION	udiciai ileii avolua		ions or	
	certify that the foregoing is a complete statement o					
this ba	certify that the foregoing is a complete statement o		t for payment to me fo			
this ba	certify that the foregoing is a complete statement on ankruptcy proceeding.	f any agreement or arrangemen /s/ Richard R. Richard R. Gr	t for payment to me for Grindstaff indstaff			
this ba	certify that the foregoing is a complete statement of ankruptcy proceeding.	f any agreement or arrangement /s/ Richard R. Richard R. Gr Signature of Atta	t for payment to me for Grindstaff indstaff orney			
this ba	certify that the foregoing is a complete statement of ankruptcy proceeding.	f any agreement or arrangement /s/ Richard R. Richard R. Gr Signature of Atta	t for payment to me for Grindstaff indstaff orney indstaff, Attorney			
this ba	certify that the foregoing is a complete statement of ankruptcy proceeding.	/s/ Richard R. Richard R. Gr Signature of Atte Richard R. Gr 840 E. River P Ste 605	t for payment to me for Grindstaff indstaff orney indstaff, Attorney Place			
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